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LIFE SAFETY INFORMATION

TYPE OF CONSTRUCTION: _____

NUMBER OF STORIES: _____

NUMBER OF UNITS: _____

STUDENT HOUSING: _____

SENIOR LIVING: _____ AGE _____

ASSISTED LIVING: _____

HUD HOUSING: _____

SUBSIDIZED: _____

SINGLE ROOM OCCUPANCY: _____

HANDICAPPED/DISABLED _____ IF, SO NEED
PERCENTAGE _____

DAYCARE CENTER _____

TYPE OF COMMERICAL OCCUPANCY: _____

SQUARE FOOTAGE: _____

BUILDING UPDATES:(PLEASE DENOTE YEAR COMPLETED)

WIRING: _____ PLUMBING _____ ROOF _____

OCCUPANCY RATE _____

NUMBER OF BLDGS _____

SPRINKLERED:

STANDPIPES:

EMERGENCY LIGHTING:

HARD WIRED/BATTERY OPERATED SMOKE DETECTORS :

FIRE EXTINGUISHERS(UNIITS & HALLWAYS:

MARKED EMERGENCY EXITS:

BUZZER ENTRY:

DOORMAN(24HOUR)

SECURITY CAMARAS:

HOW MANY MEANS OF INGRESS/EGRESS:

OF ELEVATORS:

ELEVATOR MAINTENANCE CONTRACT ON FILE:

LAKE OR POND ON PREMISES?

FENCED?

SWIMMING OR BOATING ALLOWED?

NUMBER OF POOLS?

FENCED WITH SELF LATCHING GATES?

DIVING BOARDS OR SLIDES?

LIFE GUARDS

DEPTH ADEQUATELY MARKED?

INDOOR PARKING GARAGES?